

ICS Form 221 Demobilization Checklist

DEMOBILIZATION CHECKOUT		ICS-221
1. INCIDENT NAME/NUMBER	2. DATE/TIME	3. DEMOB NO.
4. UNIT/PERSONNEL RELEASED		
5. TRANSPORTATION TYPE/NO.		
6. ACTUAL RELEASE DATE/TIME		7. MANIFEST YES NO NUMBER _____
8. DESTINATION _____		9. AREA/AGENCY/REGION NOTIFIED NAME _____ DATE _____
10. UNIT LEADER RESPONSIBLE FOR COLLECTING PERFORMANCE RATING		
<div>11. UNIT/PERSONNEL YOU AND YOUR RESOURCES HAVE BEEN RELEASED SUBJECT TO SIGNOFF FROM THE FOLLOWING:</div> <div style="text-align: right; font-size: small;">(DEMOB. UNIT LEADER CHECK <input checked="" type="checkbox"/> APPROPRIATE BOX)</div> <div style="margin-top: 5px;"> <u>LOGISTICS SECTION</u> </div> <div style="margin-top: 5px;"> <input type="checkbox"/> SUPPLY UNIT _____ </div> <div style="margin-top: 5px;"> <input type="checkbox"/> COMMUNICATIONS UNIT _____ </div> <div style="margin-top: 5px;"> <input type="checkbox"/> FACILITIES UNIT _____ </div> <div style="margin-top: 5px;"> <input type="checkbox"/> GROUND SUPPORT UNIT LEADER _____ </div> <div style="margin-top: 20px;"> <u>PLANNING SECTION</u> </div> <div style="margin-top: 5px;"> <input type="checkbox"/> DOCUMENTATION UNIT _____ </div> <div style="margin-top: 20px;"> <u>FINANCE/ADMINISTRATION SECTION</u> </div> <div style="margin-top: 5px;"> <input type="checkbox"/> TIME UNIT _____ </div> <div style="margin-top: 20px;"> <u>OTHER</u> </div> <div style="margin-top: 5px;"> <input type="checkbox"/> _____ </div> <div style="margin-top: 5px;"> <input type="checkbox"/> _____ </div>		
12. REMARKS _____ _____		
221 ICS 1/83		

NFES 1353

INSTRUCTIONS ON BACK